



Budget P L A N N E R

THIS PLANNER BELONGS TO



BANK ACCOUNTS



BANK NAME: _____

ACCOUNTS NAME: _____

ACCOUNT NUMBER: _____

TYPE OF ACCOUNT: _____

PHONE NUMBER: _____

WEBSITE: _____

NEAREST BRANCH: _____

NOTES: _____

E-BANKING

USERNAME

PASSWORD

EMAIL ADDRESS

BANK NAME: _____

ACCOUNTS NAME: _____

ACCOUNT NUMBER: _____

TYPE OF ACCOUNT: _____

PHONE NUMBER: _____

WEBSITE: _____

NEAREST BRANCH: _____

NOTES: _____

E-BANKING

USERNAME

PASSWORD

EMAIL ADDRESS



CREDIT CARDS



BANK NAME: _____

ACCOUNTS NAME: _____

CARD NUMBER: _____

EXPIRY DATE: _____

PHONE NUMBER: _____

BANK WEBSITE: _____

NEAREST BRANCH: _____

NOTES: _____

CARD DETAILS

CARD TYPE: _____

CARD NUMBER: _____

CREDIT LIMIT: _____

PIN: _____

BANK NAME: _____

ACCOUNTS NAME: _____

CARD NUMBER: _____

EXPIRY DATE: _____

PHONE NUMBER: _____

BANK WEBSITE: _____

NEAREST BRANCH: _____

NOTES: _____

CARD DETAILS

CARD TYPE: _____

CARD NUMBER: _____

CREDIT LIMIT: _____

PIN: _____



ACCOUNT TRACKER



ACCOUNTS DETAILS:

DATE:	BANK:	ACCOUNT NO:
STARTING BALANCE:		DESCRIPTION:
BALANCE:	DEPOSIT:	WITHDRAWAL:

ACCOUNTS DETAILS:

DATE:	BANK:	ACCOUNT NO:
STARTING BALANCE:		DESCRIPTION:
BALANCE:	DEPOSIT:	WITHDRAWAL:

ACCOUNTS DETAILS:

DATE:	BANK:	ACCOUNT NO:
STARTING BALANCE:		DESCRIPTION:
BALANCE:	DEPOSIT:	WITHDRAWAL:

ACCOUNTS DETAILS:

DATE:	BANK:	ACCOUNT NO:
STARTING BALANCE:		DESCRIPTION:
BALANCE:	DEPOSIT:	WITHDRAWAL:



MONTHLY BUDGET



MONTHLY GOAL:

MONTH/YEAR:

INCOME

DATE	DESCRIPTION	AMOUNT	AFTER TAX

FIXED EXPENSES

DATE	DESCRIPTION	AMOUNT
TOTAL		

OTHER EXPENSES

DATE	DESCRIPTION	AMOUNT
TOTAL		

RECAP

	GOAL	ACTUL	DIFFERENCE
EARN			
SPENT			
DEBT			
SAVED			



ZERO BUDGET



MONTH/YEAR:

INCOME	BUDGET	ACTUAL	SAVING PLAN	BUDGET	ACTUAL
TOTAL					
			TOTAL SAVING LEFTOVER		
BILL TOTAL LEFTOVER					
			TOTAL SAVING LEFTOVER		
SINKING FUNDS TOTAL LEFTOVER					
SINKING FUNDS TOTAL LEFTOVER			DAILY LIVING TOTAL FINAL BUDGET (MAKE IT ZERO)		





CREDIT SCORE IMPORTANTS



CURRENT CREDIT SCORE:

CREDIT SCORE GOAL:

TOP THREE PRIORITIES

1:

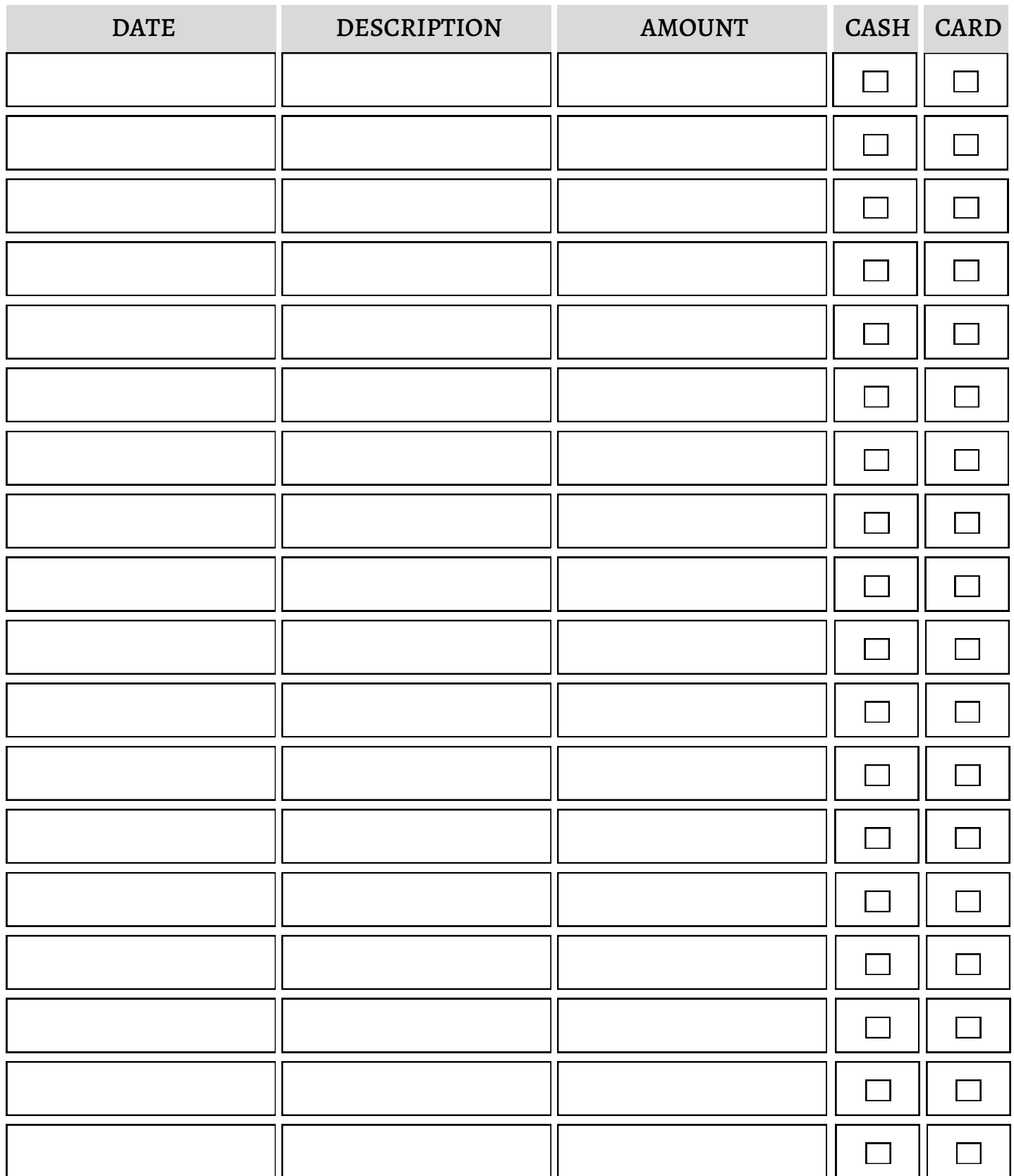
2:

3:

ACTION STEPS

IMPACT ON SCORE

NOTES:





NO SPEND CHALLENGE



MAIN GOAL:

MONTH:

START DATE:

END DATE:

RULES:

DO NOT BUY LIST

EXCEPTIONALS FROM THE RULES



NO SPEND CHALLENGE



MAIN GOAL:

MONTH:

START DATE:

END DATE:

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

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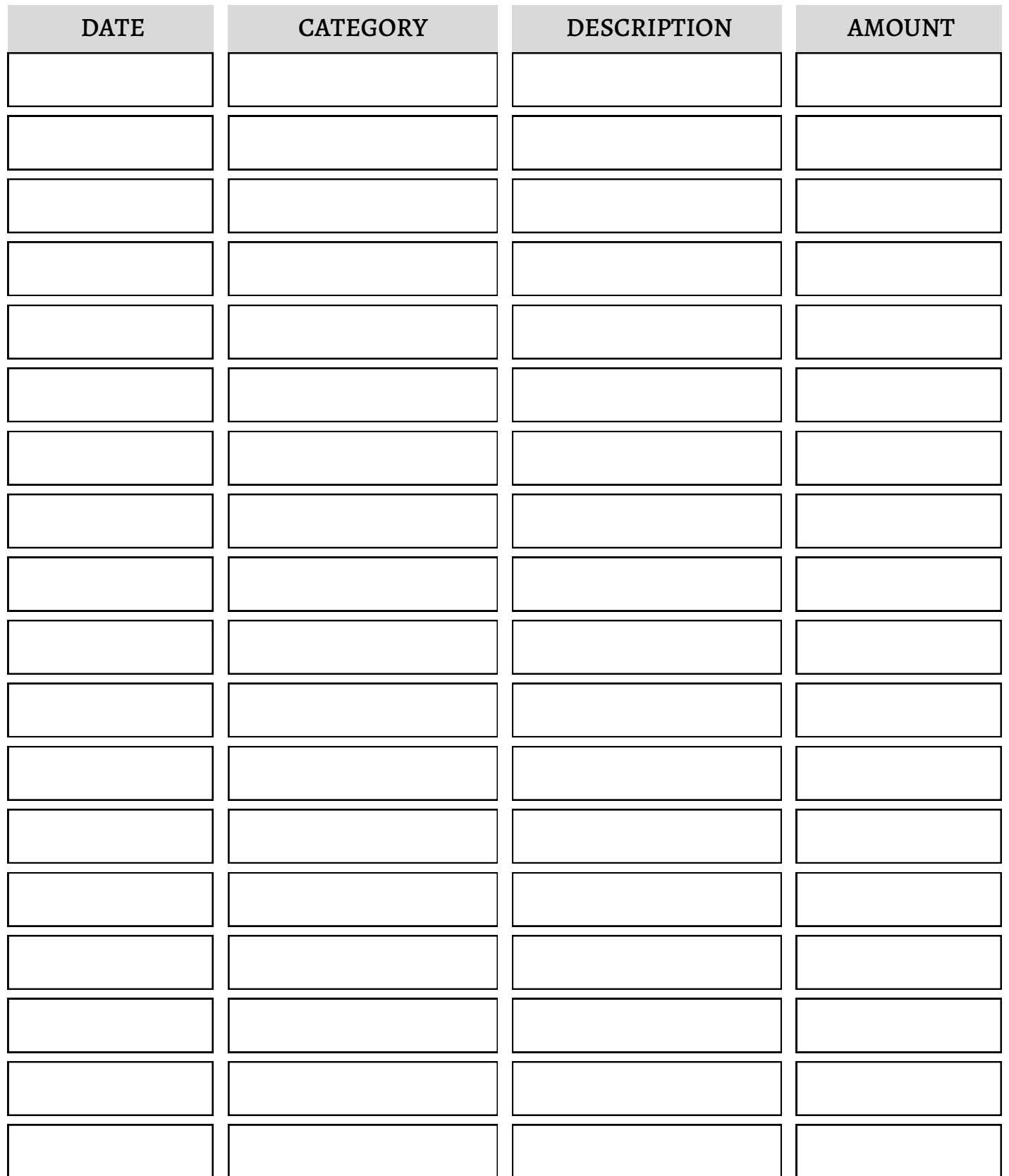
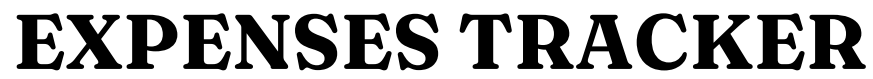
30

31

NUMBER OF SUCCESSFUL DAYS:

NUMBER OF UNSUCCESSFUL DAYS:

TOTAL SAVED AMOUNT:





PAYCHECK BUDGET



BUDGET GOAL:

TIME PERIOD:

SOURCES OF INCOME	BUDGET	ACTUAL
TOTAL		

EXPENSE	BUDGET	ACTUAL	DIFFERENCE	DATE/PAID
TOTAL				

SUMMARY	INCOME	EXPENSE	DIFFERENCE
ACTUAL			
BUDGET			



YEARLY EXPENSES



JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE

JULY

AUGUST

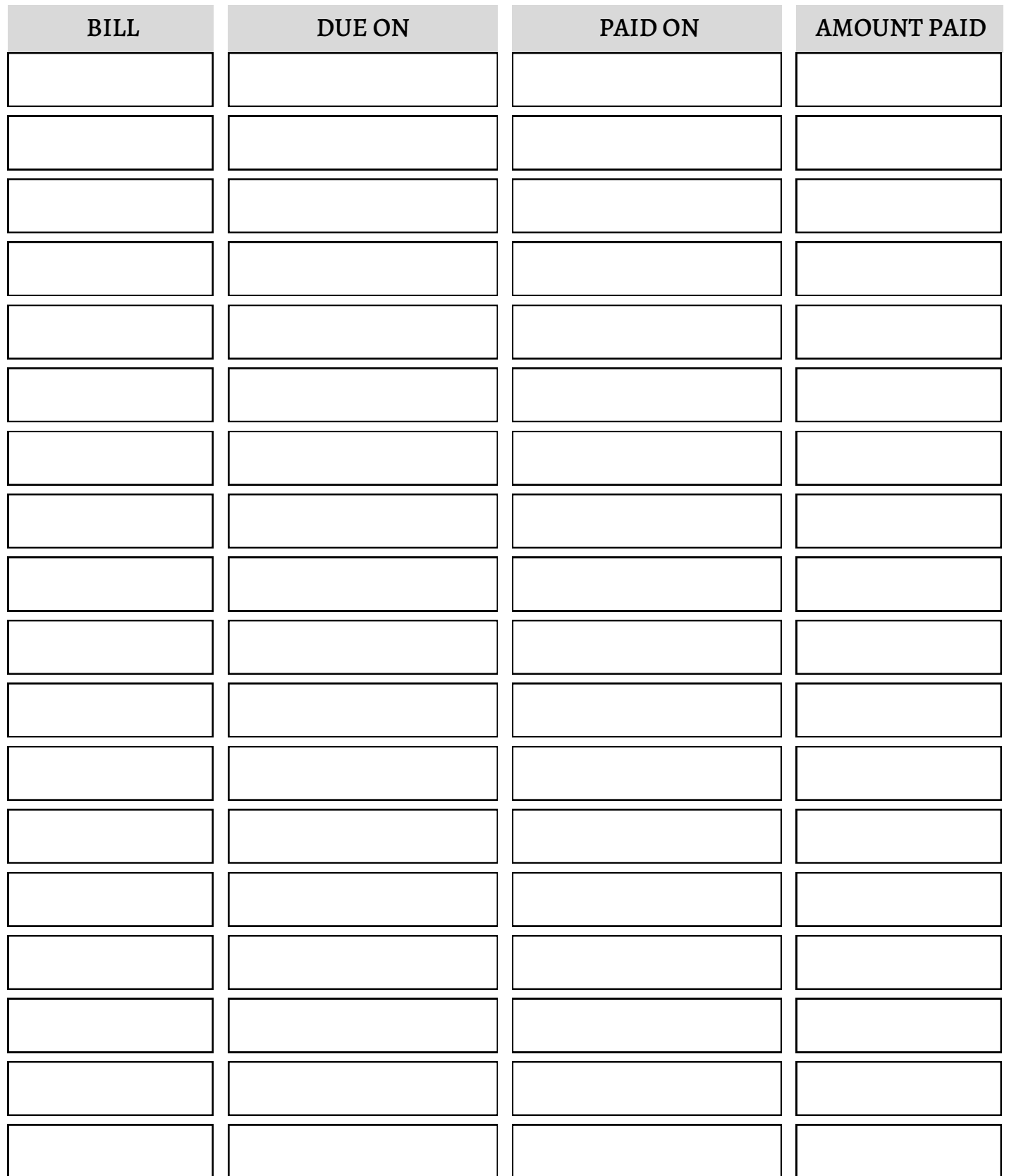
SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER

[illegible]





BILL & SUBSCRIPTION TRACKER



BILL	DUE	AMOUNT	J	F	M	A	M	J	J	A	S	O	N	D
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

ANNUALY

DESCRIPTION	DUE	AMOUNT	ANNUAL RATE



FAMILY BUDGET



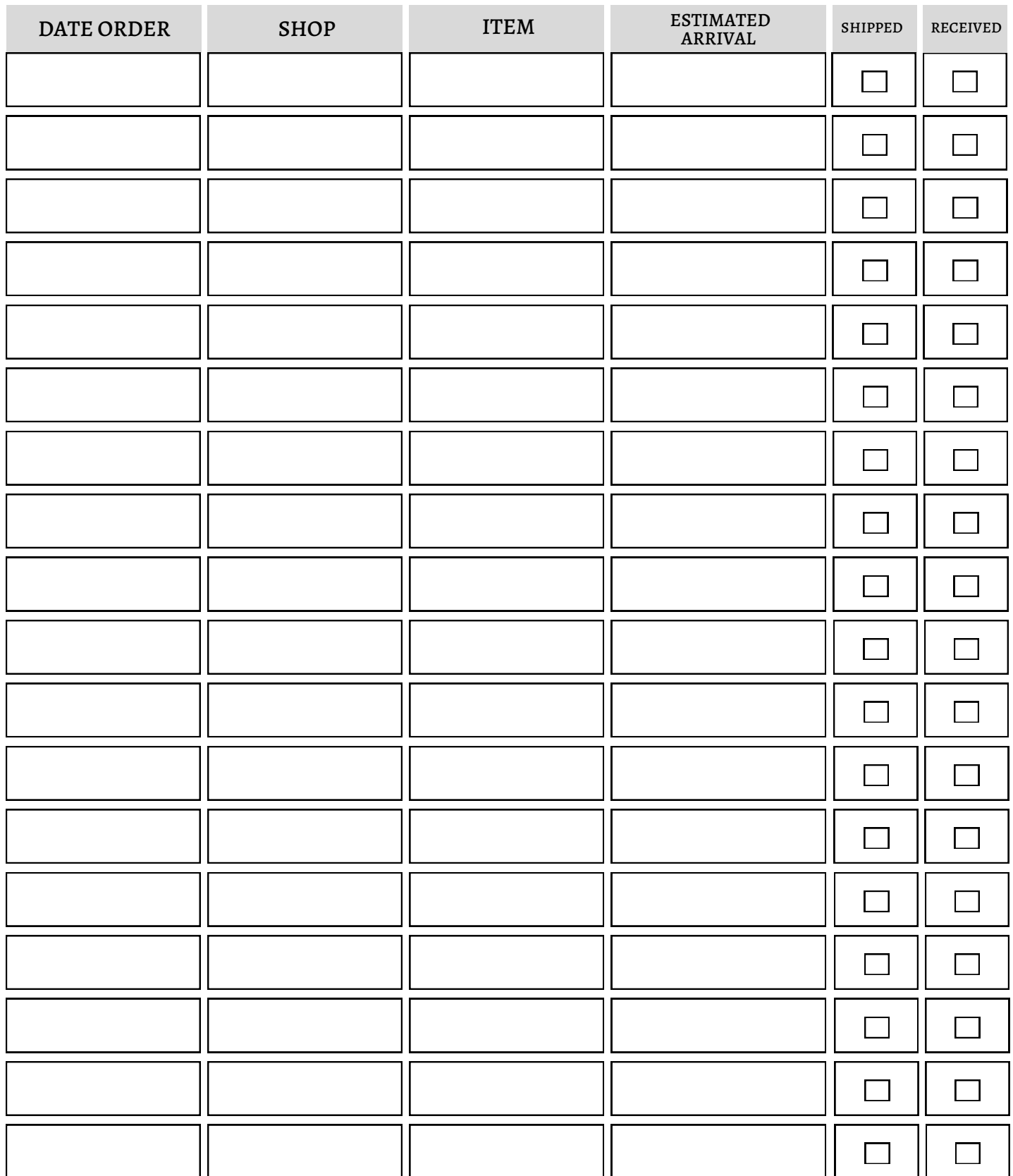
HOUSE EXPENSES	BUDGET	ACTUAL	DIFFERENCE	NOTES

AUTO EXPENSES	BUDGET	ACTUAL	DIFFERENCE	NOTES

INSURANCE EXPENSES	BUDGET	ACTUAL	DIFFERENCE	NOTES

LIVING EXPENSES	BUDGET	ACTUAL	DIFFERENCE	NOTES

MSC EXPENSES	BUDGET	ACTUAL	DIFFERENCE	NOTES



SHOPPING LIST

[illegible]



NEW EXPERIENCES

EXERCISE / SPORT



HELPING OTHERS

SELF - FULFILLMENT

EDUCATION

[illegible]

**WEEK OF:**

BUDGET:

MONDAY **DATE:** _____

TUESDAY **DATE:** _____

WEDNESDAY **DATE:** _____

THURSDAY DATE: _____

[illegible]

**WEEK OF:**

BUDGET:

FRIDAY **DATE:** _____

SATURDAY DATE: _____

SUNDAY **DATE:** _____

[illegible]



UPCOMING EXPENSES



JANUARY

--

FEBRUARY

--

MARCH

--

APRIL

--

MAY

--

JUNE

--

JULY

--

AUGUST

--

SEPTEMBER

--

OCTOBER

--

NOVEMBER

--

DECEMBER

--



MARCH

[illegible]

JUNE

SEPTEMBER

DECEMBER





FINANCIAL CALENDAR



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

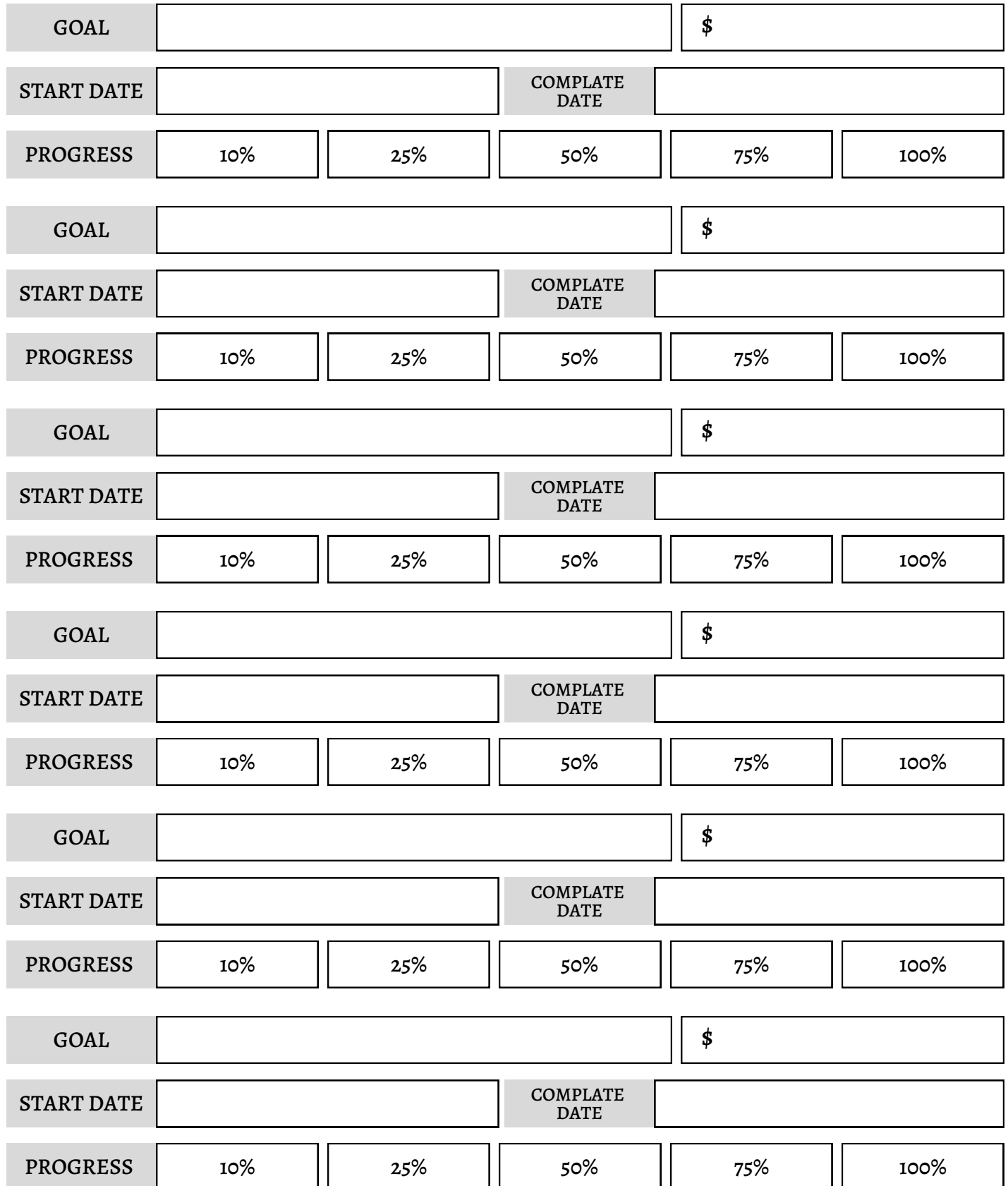
NOTES: _____



PROFIT & LOSS



MONTH	REVENUE	EXPENSES	PROFIT	LOSS
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
YEARLY TOTAL				





FINANCIAL SUMMARY



	INCOME	SAVINGS	EXPENSES	DEBT PAID	GIVING
JANUARY					
FEBRUARY					
MARCH					
APRIL					
MAY					
JUNE					
JULY					
AUGUST					
SEPTEMBER					
OCTOBER					
NOVEMBER					
DECEMBER					
TOTAL					

[illegible]

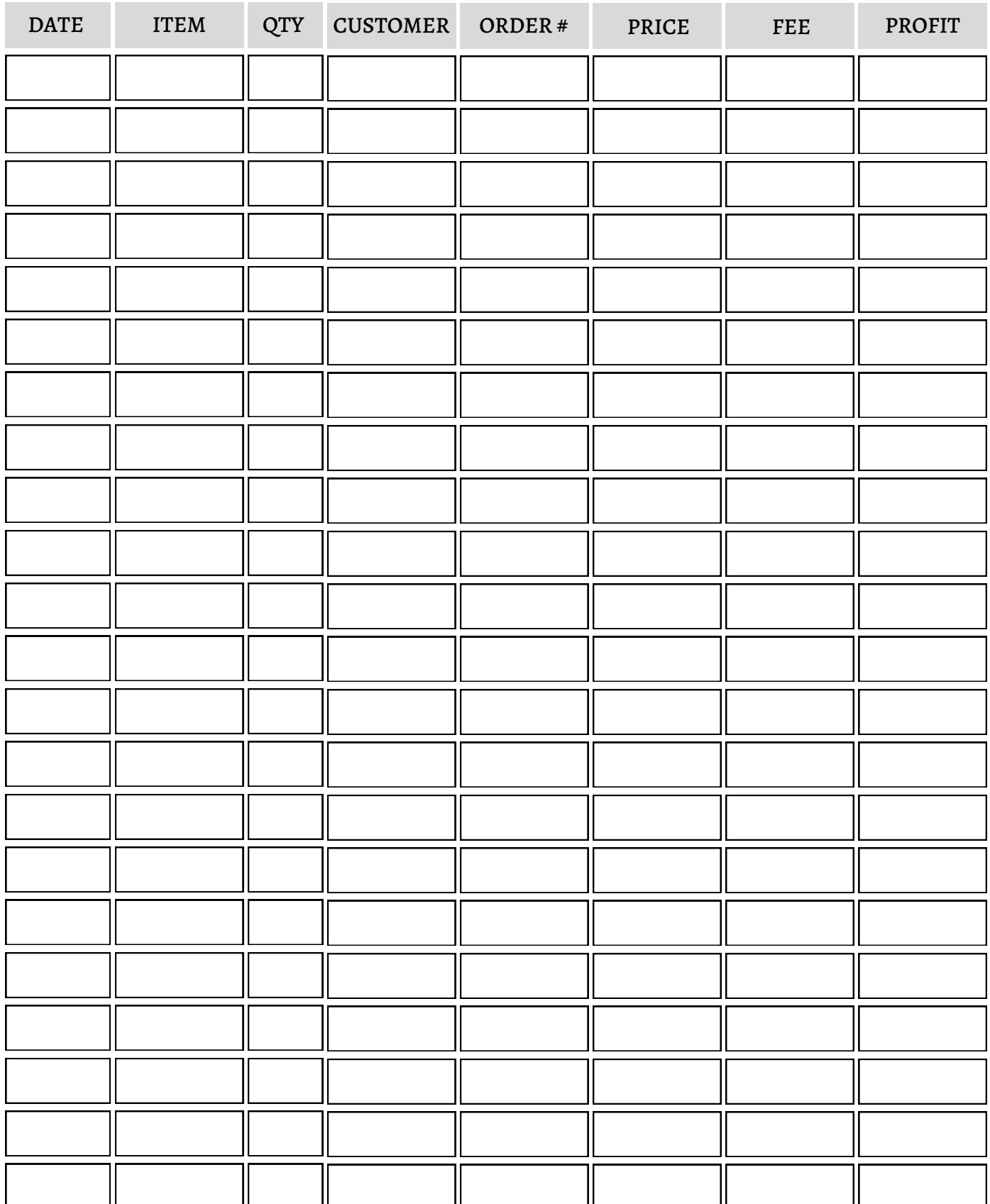
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ANNUAL DONATION LOG



	ORGANIZATION	DESCRIPTION	VALUE
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			





BILLING ACCOUNTS



BILL:
COMPANY NAME :
CONTACTS:
ACCOUNT NO:
PAYMENT METHOD:
PAYMENT DATE:
ADDRESS:
NOTES:

BILL:
COMPANY NAME :
CONTACTS:
ACCOUNT NO:
PAYMENT METHOD:
PAYMENT DATE:
ADDRESS:
NOTES:

BILL:
COMPANY NAME :
CONTACTS:
ACCOUNT NO:
PAYMENT METHOD:
PAYMENT DATE:
ADDRESS:
NOTES:

BILL:
COMPANY NAME :
CONTACTS:
ACCOUNT NO:
PAYMENT METHOD:
PAYMENT DATE:
ADDRESS:
NOTES:



SAVING PLANNER



YEAR: _____

JANUARY

--

FEBRUARY

--

MARCH

--

APRIL

--

MAY

--

JUNE

--

JULY

--

AUGUST

--

SEPTEMBER

--

OCTOBER

--

NOVEMBER

--

DECEMBER

--

MONTHLY GOALS

--

YEARLY GOALS

--



52 WEEK SAVING



STARTING BALANCE:

SAVING FOR:

SAVING GOAL:

MINIMUM SAVING:

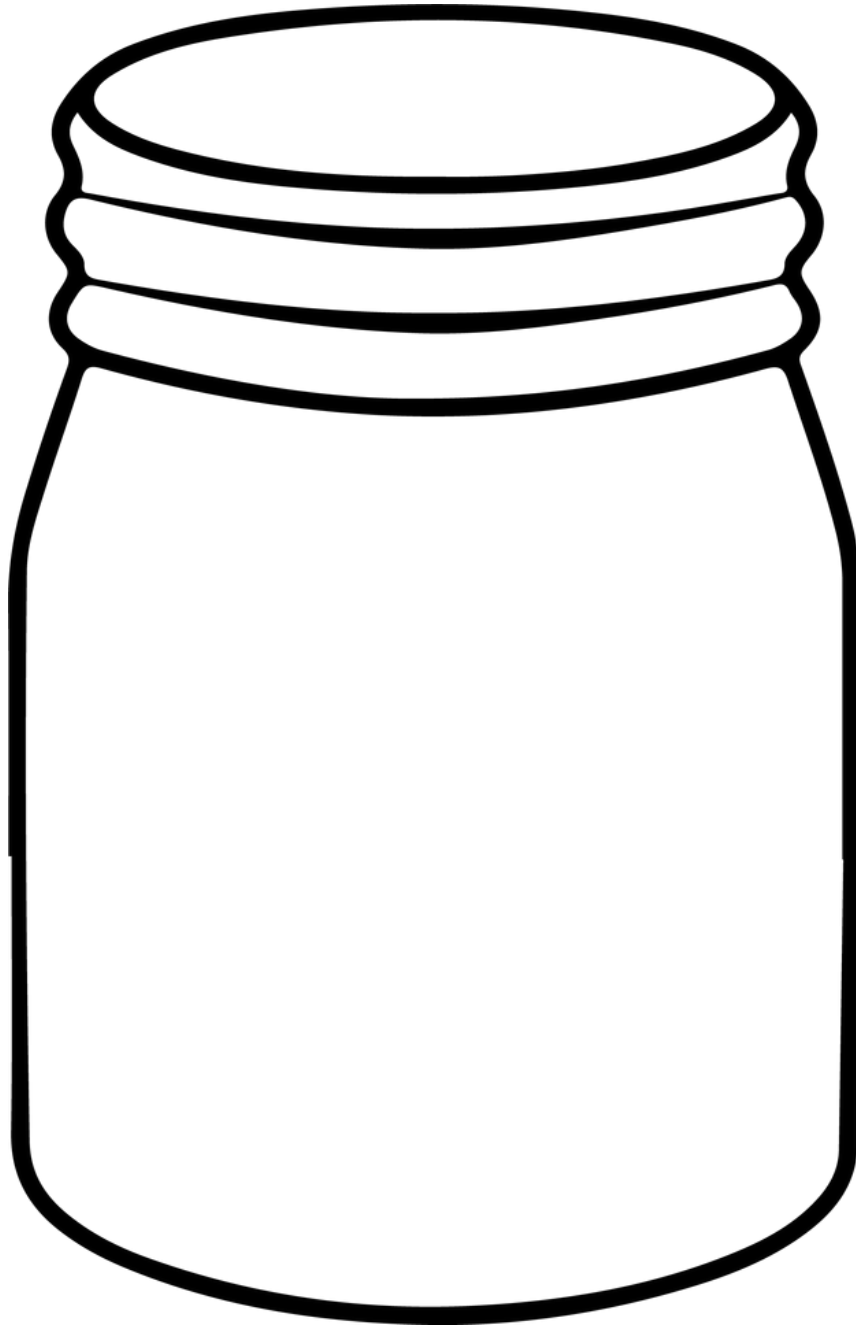
GOAL MONTHLY SAVING:

GOAL SAVING DATE:

WEEK	AMOUNT SAVED	BALANCE	WEEK	AMOUNT SAVED	BALANCE
1			21		
2			22		
3			23		
4			24		
5			25		
6			26		
7			27		
8			28		
9			29		
10			30		
11			31		
12			32		
13			33		
14			34		
15			35		
16			36		
17			37		
18			38		
19			39		
20			40		



SAVING JAR TRACKER



GOAL AMOUNT: _____

= _____